| Substitute for Form PTO-875  |                     |              |                                  |                  |          |                   |                        | 10/6/1/29/ |                    |                   |
|--|---------------------|--------------|----------------------------------|------------------|----------|-------------------|------------------------|------------|--------------------|-------------------|
| CLAIMS AS FILED - PART I   |                     |              |                                  |                  |          |                   |                        | 00         |                    | R THAN            |
| (Column 1)   |                     | umn 1)       | (Column 2)                       |                  | ı        | SMALL ENTITY      |                        | OR         | SMALL              | ENTITY            |
| FOR MUMBER FILED   |                     | NUMBER EXTRA |                                  |                  | RATE     | FEE               |                        | RATE       | FEE                |                   |
| (37 CFR 1.16(a))   |                     |              |                                  |                  |          |                   | \$                     | OR         |                    |                   |
| TOTAL CLAIMS<br>(37 CFR 1.16(c))   |                     | minus 20     | ,                                |                  |          | X 1 =             |                        |            |                    | <u> </u>          |
| INDEPENDENT CLAIM<br>(37 CFR 1.16(b))  | s                   | minus :      | ,                                |                  |          | X 1 =             |                        | OR         | X 1 =              |                   |
|  |                     |              | 37 CFR 1.16(d))                  |                  | -        |                   |                        | OR         | X1=                | <br>              |
| * If the difference in column 1 is less than zero, enter "0" in column 2.  |                     |              |                                  |                  | 1        | + \$ =            |                        | OR         | +5                 |                   |
|  | AIMS AS AM          |              |                                  | ٤.               |          | TOTAL             | L                      | OR         | TOTAL              | l                 |
|  | WIND VO WIN         | CNOCO        | - PARTII                         | •                |          |                   |                        |            |                    |                   |
| <del></del>  | (Column 1)          |              | (Column 2)                       | (Column 3)       |          | SMALL E           | YTITM                  | OR         | OTHER<br>SMALL     | R THAN<br>ENTITY  |
| <  | CLAIMS<br>REMAINING |              | HIGHEST                          | PRESENT          | i        | RATE              | ADDI-                  |            |                    | ,                 |
| Total  Total  Order Liech  Independent  Order Liech  Ender Description   | AFTER<br>AMENDMENT  |              | PREVIOUSLY PAID FOR              | EXTRA            |          |                   | TIONAL<br>FEE          |            | RATE               | TIONAL            |
| Total<br>Or CFR 1.16(cf)   | 15                  | Minus        | <i>"20</i>                       | =                |          | X \$=             | 7=                     | OR         | x s =              | FEE               |
| Z Independent (37 CFR 1.16(6))   | 3                   | Minus        | _ 3                              | -                |          | x s=              |                        | OR         | X 1 =              |                   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))  |                     |              |                                  |                  |          | +şe               |                        | OR         | +5 =               |                   |
|  | •                   |              |                                  | •                | •        | TOTAL .           |                        | OR         | TOTAL ADDIL FEE    |                   |
|  | (Column 1)          |              | (Column 2)                       | (Column 3)       |          | •                 |                        |            |                    |                   |
| <b>ω</b>   | CLAIMS<br>REMAINING |              | HIGHEST<br>NUMBER                | PRESENT          | ſ        |                   |                        |            |                    |                   |
| z  | AFTER               |              | PREVIOUSLY                       | EXTRA            |          | RATE              | ADOI-<br>TIONAL        |            | этал               | ADDI:<br>TIONAL : |
| ∑ Lotst  | AMENDKENT           | Minus        | PAID FOR                         |                  | -        |                   | FEE                    |            |                    | FEE               |
| C) Coe track   |                     | Miraus       | 444                              |                  |          | x \$=             |                        | OR         | X \$=              |                   |
| Total  Total  Total  Total   |                     |              |                                  | =                | ١        | x 1=              | ·                      | OR         | X \$=              |                   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))  |                     |              |                                  |                  |          | ·+s =             |                        | OΩ         | +5 =               |                   |
| •  |                     |              |                                  |                  | <b>L</b> | TOTAL<br>ADDL FEE |                        | OR         | TOTAL<br>ADD'L FEE |                   |
|  | (Column 1)          |              | (Column 2)                       | (Column 3)       |          | •                 |                        |            | , 550, 62          |                   |
| آ اد   | CLAIMS<br>REMAINING |              | HIGHEST                          |                  | ſ        |                   |                        | •          | [                  |                   |
| z  | AFTER<br>AFCHINGET  |              | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE | •          | RATE               | FEE.              |
| Corce view   |                     | f.tinus      |                                  | = .              | Ì        | X \$ =            |                        | OR         | X 1 =              | rec               |
| T (31 CLU 1'18(8))   |                     | Minus        | 1+1                              | =                |          | X 1 =             |                        |            |                    |                   |
| Z ALCONSIGNT PREVIOUSLY EXTRA  D Tricki (37 Cr 4 (1460))  Minus " =  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR (1.16(d))) |                     |              |                                  |                  | Ì        |                   |                        | OR         | × \$=              | •                 |
|  |                     |              |                                  |                  | l        | TOTAL =           |                        | OR         | + \$ ·=            |                   |
|  |                     |              |                                  |                  |          |                   | 1                      |            | ILLIAL             | 4                 |

The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate bor in column 1.

This collection of internation is required by 37 CFR 1.15. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-RTO-9199 and select option 2,---.